

This form is affected by the Privacy Act of 1974; see Privacy Act
Statement on reverse before completing this form.

EEOC

Massachusetts Commission Against Discrimination And EEOC
(State or local Agency, if any)

Name (Indicate Mr., Mrs., or Ms.)

Home Telephone

Patricia Cheney

(978) 469-1995

Street Address

City, State and Zip Code

County

P.O. Box 21

Plaistow, NH 03865

Rockingham

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, STATE OR LOCAL
GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME
(If more than one list below)

Name	No. of Employees/Members	Telephone Number (Include Area Code)
Emmaus, Inc.	50+	(978) 241-3400

Street Address	City/State/Zip Code
P.O. Box 568	Haverhill, MA 01830

Name	Telephone Number (Include Area Code)

Street Address	City/State/Zip Code

Cause of Discrimination Based On (Check appropriate box)	Date of most recent or continuing discrimination took place
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> AGE <input type="checkbox"/> RETALIATION <input type="checkbox"/> OTHER (Specify) _____ Handicap	1/31/01

THE PARTICULARS ARE (If additional space is needed, attach additional sheet) FMLA

The Complainant was employed as the Program Director for "Mitch's Place," a homeless shelter. On January 31, 2001 the Respondent terminated the Complainant from her employment because she was unable to work due to severe depression. The Complainant had benefits through her employment, including accrued sick leave, leave of absence and short and long term disability. The Complainant believes that she has been discriminated against due to her disability, in violation of M.G.L. c. 151B, the FMLA (29 U.S.C. section 2601, et seq.) and the ADA (42 U.S.C. section 12101 et seq.)

I also want this charge filed with the EEOC. I will advise the agencies if I change my address or telephone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	Notary -- (When necessary to meet State and Local Requirements) I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief
--	--

I declare, under penalty of perjury that the foregoing is true and correct <i>X Patricia B Cheney</i> Date <u>May 2, 2001</u> Charging party (Signature)	SIGNATURE OF COMPLAINANT <i>X Tranne M. McRoster</i> 9/20/07 SUBSCRIBED AND SWORN TO BEFORE ME, THIS DATE (Day, month, year) <u>2 day of May, 2001</u>
--	---

GLEASON LAW OFFICES

A PROFESSIONAL CORPORATION

163 MERRIMACK STREET

HAVERHILL, MA 01830

SCOTT F. GLEASON
THOMAS J. GLEASON*
SEAN P. GLEASON
WILLIAM P. BOLAND

TELEPHONE (978) 521-4044
FAX (978) 521-3738

ROBERT J. WHITE*
Of Counsel

March 24, 2003

Elizabeth A. Marcus
U.S. Equal Employment Opportunity Commission
John F. Kennedy Federal Building
Government Center, 4th Floor, Room 475
Boston, MA 02203


RE: Patricia Cheney vs. Emmaus, Inc.
Charge Number: 16CA103060

Dear Ms. Marcus:

Enclosed please find the signed Agreement to Mediate and Confidentiality Agreement relative to the above captioned matter.

Thank you.

Very truly yours,


Thomas J. Gleason

TJG/cfb
Enclosures



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
Boston Area Office

John F. Kennedy Federal Building
Government Center
Fourth Floor, Room 475
Boston, MA 02203
(617) 565-3200
TTY (617) 565-3204
FAX (617) 565-3196

March 26, 2003

Re: Charge No.: 16CA103060
Patricia Cheney v. Emmaus, Inc..

Ms. Patricia Cheney
c/o Thomas J. Gleason
163 Merrimack Street
Haverhill, MA 01830

Dear Ms. Cheney:

On May 4, 2001, you filed the above referenced charge in which you alleged you were discriminated against because of your disability. The Americans with Disabilities Act (ADA) of 1990 only prohibits employment discrimination against **"qualified individuals with disabilities"**. **A qualified individual with a disability is an individual with a disability who meets the skill, experience, education, and other job related requirements of a position held or desired, and who with or without reasonable accommodations, can perform the essential functions of a job.**

The ADA defines a person with a disability as an individual who has:

- . a physical or mental impairment that substantially limits one or more of her/his major life activities;
- . has a record of an impairment that substantially limits one or more major life activities;
- . is regarded as having an impairment that substantially limits one or more major life activities.

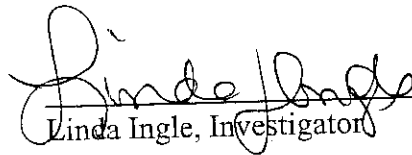
It is important that you provide this office with medical documentation of your disability and the manner in which it substantially limits one or more of your major life activities, or evidence that you have a record of such an impairment, or evidence that the employer treated you as having such an impairment.

You must submit the information requested within thirty (30) days of the date on which you receive this letter. Failure to comply with this request within the allotted time will result in an administrative dismissal of your charge.

Secondly, enclosed is a copy of the response submitted by Respondent. Please submit a rebuttal and the medical documentation as soon as reasonably possible but no later than April 24, 2003.

If you have any questions regarding this request, please contact this office at (617) 565-3205.

Sincerely,


Linda Ingle, Investigator

cc: Patricia Cheney

DISMISSAL AND NOTICE OF RIGHTS

RECEIVED

To: Patricia Cheney
PO BOX 21
PLAISTOW, NH 03865

From: E.E.O.C
Boston Area Office
JFK. Federal Bldg., Rm 475
Boston, MA 02203

☐ On behalf of a person aggrieved whose identity is **CONFIDENTIAL** (29 C.F.R. 1601.7(a))

Charge Number

16CA103060

EEOC Representative

Robert L. Sanders

Telephone Number

(617) 565-3200

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

- ☐ The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.
- ☐ Your allegations did not involve a disability that is covered by the Americans with Disabilities Act.
- ☐ The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.
- ☐ We cannot investigate your charge because it was not filed within the time limit required by law.
- ☒ Having been given 30 days in which to respond, you failed to provide information, failed to appear or be available for interviews/conferences, or otherwise failed to cooperate to the extent that it was not possible to resolve your charge.
- ☐ While reasonable efforts were made to locate you, we were not able to do so.
- ☐ You had 30 days to accept a reasonable settlement offer that affords full relief for the harm you alleged.
- ☐ The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.
- ☐ The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.
- ☐ Other (briefly state) _____

- NOTICE OF SUIT RIGHTS -


(See the additional information attached to this form)

Title VII, the Americans with Disabilities Act, and/or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed WITHIN 90 DAYS of your receipt of this Notice; otherwise, your right to sue based on this charge will be lost. (The time limit for filing suit based on a state claim may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.

If you file suit based on this charge, please send a copy of your court complaint to this office.

On Behalf of the Commission


Robert L. Sanders, Boston Area Director

Enclosure(s)

APR 30 2008

(Date)

cc: EMMAUS, INC.
PO BOX 568
HAVERHILL, MA 01830

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U.S. Equal Employment Opportunity Commission

Boston Area Office
John F. Kennedy Federal Building
Government Center, Room 475
Boston, MA 02203-0208
Telephone (617) 565-3200
Facsimile (617) 565-3196

TRANSMITTAL SHEET

Date: 10/29 Time _____
To: Thomas Gleason Atty
From: Linda
Facsimile Number: 978-521-3738
Number of Pages, Including Transmittal Sheet: 4
Comments: NRTS already issued. See Attached

The Original of this document will be sent by:

☐ Ordinary Mail
☐ Overnight
☒ This will be the ONLY form of delivery

If you do not receive all of the pages, please call back as soon as possible, (617) 565-3205

Sender: Linda

IMPORTANT NOTICE

THE INFORMATION CONTAINED IN THIS FAX TRANSMISSION IS EEOC COMMUNICATION AND PRIVILEGED. IT IS INTENDED ONLY FOR THE USE OF THE ADDRESSEE. IF YOU RECEIVE THIS COMMUNICATION AND ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT THE COPYING OR DISTRIBUTION OF THIS COMMUNICATION IS PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS.

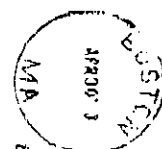
EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
BOSTON AREA OFFICE
JOHN F. KENNEDY FEDERAL OFFICE BUILDING
GOVERNMENT CENTER, ROOM 475
BOSTON, MA 02203

OFFICIAL BUSINESS
PENALTY FOR PRIVATE USE, \$300



UNRECORDED
NO INDEXING
ORDER ON FILE

FILE
MAY 6 2004



3. OFFICIAL MAIL
U.S. POSTAGE